

Governor's Commission for a Drug Free Indiana

A Division of the



Comprehensive Community Plan

County: LAPORTE

LCC: LaPorte County Drug Free Partnership

Date: June 30, 2007



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Plan Summary

Mission Statement: To bring together representatives, organizations and agencies, both public and private, which seek to provide optimal resources for the combating of alcohol and other drug abuse in LaPorte County. To formulate a countywide comprehensive plan, while evaluating and restructuring to insure its goals are met. To fund proposed projects and programs by awarding grants from the local portion of the Drug Free Community Fund.

History: The LCC was founded in 1989 as the local affiliate of the Governor's Commission. However, a group of concerned individuals had been meeting monthly for several years prior to the LCC's formation, to address substance abuse issues. This group became the core membership. Since 1989 we have revised our by-laws several times and grown in membership to 45 various agencies and 56 active individuals plus 49 others who are on our advisory/informational membership mailing list. Our average attendance is 33 at each monthly meeting. We have continued to endeavor to bring awareness and focus to the community concerning the problems of alcohol and other drugs in this county. In July 1999, the membership approved the employment of a part time coordinator to attend to LCC business. As the membership has grown and efforts to impact a wider segment of the population the hours have been expanded to 25 hours a week or more on occasion this past year. The LCC initiated a meeting agenda that has proven to be a very productive and positive step. In January, 2004 we began holding our business meetings one month alternating with the next meeting devoted to committee work. The major committees are, of course, prevention, treatment and justice. We also have a Red Ribbon Committee that plans activities for all the schools in the county as well as Marketing, and Oversight, who meet as needed. The committees are where the real work of the LCC has been occurring with the coordinator providing backup and support. To allow the committees to make as much progress and impact as possible we hold committee meetings whenever there is time at our regular business meetings as well. We gave a small stipend to provide adult leadership for the Youth Making Moves teen advisory group that have planned and sponsored several Teen Night activities in 2006 for county youth. In addition we and they co-hosted a Youth Forum in March, 2006 that has provided insight into what our youth define as the problems and presented many ideas for potential ways to address some of them including possible grants to the teens to carry out their programs. The Partnership sponsored a Community Forum in March, 2005 and held a "Townhall, A Call To Action" in April, 2007.

Some of the factors that make LaPorte County ideal for development of business and tourism include: 1) LaPorte County is bordered by Gary, Porter County and Chicago, IL. (65 miles) to the west and South Bend 30 miles to the east. Other influences are the Interstate and Toll Roads that dissect our northern geography bringing people traveling through from Detroit as well as eastern Indiana and Ohio. 2) There is public transportation available from the South Shore Railroad, Amtrak and many rail lines that carry materials around the bottom of Lake Michigan to and from Chicago. 3) We draw many tourists with such attractions as Lake Michigan's shores, a large outlet mall, a

number of fine county and city parks, smaller lakes, golf courses, and a major gambling casino. Despite all of these entities creating jobs and recreational opportunities, Northwest Indiana continues to suffer from the loss of manufacturing business and the economy is not robust in LaPorte County. This leads to hopelessness, homelessness, crime and substance use/abuse in some segments of the population. And our geographic location gives easy access to the Interstate highways where drugs are readily available east in Michigan and west in Gary and Chicago. We have a significant population of minorities including approximately 15% African American who sadly account for some 85 to 90% of jail inmates and a Hispanic population that is growing. Both of these minorities bring with them positive contributions to our diverse population but challenges as well. One other consideration is LaPorte County's large geographical size (second in the state), most of which is rural in nature. The communities in the south are small, the youth there are many miles from LaPorte and Michigan City and most are without transportation to participate in activities and events. Another factor affecting the county is the number of prisons located here with prisoner's families locating here that are usually low income and on welfare and of course are single parent families as well.

According to the PREV-STAT LaPorte County Profile #3 produced by IPRC in 2006, LaPorte County ranks in the top 10% of counties in Indiana with African American and Hispanic populations and in the bottom 10% in per capita income change over the past 20 years. Our alcohol related fatal crashes are among the highest in the state. All poverty indicators such as unemployment, free lunches, food stamps, lack of medical insurance and divorce rates are higher than the state. 24% of county citizens have less than a high school education, and 26% of the population have college degrees compared to 32% across the state. One fourth of all families are headed by a single female parent while 33 % of households have one spouse absent. Our citizens gamble more on the lottery than other Hoosiers, but not at the casino, and smoke at a higher rate. The crime index is 6% higher and property crime rate 23% higher than Indiana though personal crime is slightly lower than state statistics. The median income in households is 7% lower than the state. On the positive side 66% of families have two parents, but in 46% both are employed leaving children with less supervision and attention after school.

New PREV-STAT data for our county along with two Roosevelt University Studies the Partnership coommissioned and completed in 2006 give us much data to help us examine and determine what to do and how we should move forward in prevention, law enforcement and treatment for our citizens. We also wrote a SPF-SIG grant this year to help address the signifigant alcohol problems we and the state have identified in our county but we were not selected.

The number of meth labs located and closed down has remained quite low, only one for each of the previous three years, two last year and four in 2005. However, meth as a serious drug problem is headed this way as we are only miles up the road from Starke County and others near by that have seen the growing impact on

Summary of the Comprehensive Community Plan: The Community Forum we held in March, 2005 is being updated as we held a second forum in April, "Townhall: A Call To Action" to share with the key stakeholders and the general community the results of the two Roosevelt University studies completed in 2006. We continue to expand our informational mailing list to approximately 50 members in order to include and inform as many citizens as possible about what the problems are and how we need their help to confront them. This has allowed us to reach beyond our traditional agencies and organizations to tap the knowledge and wisdom of many other community leaders and to continue this dialogue with citizens and youth as we reach out on a biannual basis.

The problem statements identified last year are the basis of our efforts to focus on these issues through programs and funding and serve as our guide as how to allocate grant monies in the county. This plan will outline the efforts we have made to address the five problem statements as identified at our community forum in 2005 through financial support of approximately 20 -22 programs that directly impact those goals and objectives. We participate in other groups such as the Tobacco Coalition, the study committee for drug court, have met with LaPorte Mayor's Strategic Plan Committee and we have offered our leadership to the annual Symposium held by the Juvenile Justice Advisory Committee on addiction topics and speakers. The plan will outline the new programs in place, new initiatives and continuing support of those agencies and organizations we believe are making an impact in the community. It include results of both the substance use studies by the Roosevelt University, Chicago, Institute of for Metropolitan Affairs Affairs. We will include copies of the monthly columns , "The Partnership Perspective" published for the past 19 months) we have had published in three of the four county newspapers as well as shared with many schools for principals to use in their school newsletters. We will provide as many statistics and as much data as we can include in the very limited format and space provided to document how LaPorte County but we still do not have full cooperation from treatment facilities, hospitals, and schools. There was only one school corporation that has allowed any survey of their students on ATOD since 2004. When we asked all the schools for reports and information in January, 2007 only one responded. We found the published reports on the schools on ISTEP printed in the local newspapers that gave some information Roosevelt University has done interviews and collected annual statistics from a wide variety of agencies and institutions. And of course we will use RU's information extensively for our county plan for the future. The County Plan Problem Statements will be rewritten in 2008 as will the recommended actions.

Local Drug Free Communities Fund Information will sent as a separate report as our community consultant has instructed.

Membership List

County LCC Name: LaPorte County Drug Free Partnership. There are two kinds of membership, active who attend our meetings and informational * who are supportive and interested in our efforts.

Name	Organization	Race	Gender	Category
*Dr. Kumud Aggerall	Swanson Center	Indian	F	Treatment
Donna Albers	Swanson Center	Cauc	F	T
*Thomas Alivzos	Circuit Court	C	M	Justice
Albertine Allen	Minority Health	African Am.	F	Prevention
*James Arnold	State Senator	C	M	all
*Kelly Bajdek	LP Hospital	C	F	T
*Paul Baldoni	Superior Court	C	M	J
Scitt Barlag	Juv. Center	C	M	J
Leigh Barnes	LP Schools	C	F	P
*Karen Bernacki	CASA	C	F	P
Tina Bernth	NP Schools	C	F	P
*Tim Bietry	MC Chamber	C	M	all
*Martha Birkholtz	LP School	C	F	P
*Dr. Derek Bjonback	Purdue North Central	C	F	T
Chris Blake	MCYMCA	C	F	P
Jeane Bock	Dunebrook	C	F	T
*Wm Boklund	Sup. Ct. 4	C	M	J
Dan Bolinger	Sup. Ct 3	C	M	J
Gary Broiling	Sheriff Dept	C	M	J
Donna Bunch	Westville School	C	F	p
Joseph Bunch	Juv. Services	C	M	J
Chris Buresh	Church	C	M	P
Dan Carpenter	Boy Scouts	C	M	P
Joyce Dalton	Free Clinic	C	F	T/P
Jacki Daniet	MCYMCA	C	F	P
*Walter Day	School police	AA	M	J
Robert DeLauretis	Volunteer	C	M	all
*Tom Dermody	State Representative	C	M	all
Steve Eyrick	Probation	C	M	J

Mike Dove	LPPD	C	M	J
Rebecca Fistel	Circuit Ct.	C	M	J
*Judy Franks	LP Hospital	C	F	T
*Bob Gaekle	PNC police	C	M	J
Scott Gilbert	IN State Police	C	M	J
Sandra Gleim	Healthy Comm.	C	F	P
*Judy Gonsorek	Open Door Free Clinic	C	F	T/P
*Jim Gunning	Westville PD	C	M	J
*Wm. Hager	Co Commission	C	M	all
*Katy Hardwick	SC School	C	F	P
*Mark Harris	MCPD	C	M	J
*Sue Harrison	MCPD	C	F	J
Herb Higgin	MC Schools	C	M	P
*Jerry Huddleston	Ivy Tech	C	M	P
Arlene Hudgens	MC Schools	C	F	P
*Jim Jessup	LP Co Leadership	C	M	P
Roxann Justice	LP Hospital	C	F	T
Tina Kaldahl	NP Schools	C	F	P
*Fred LaBorn	MC Schools	C	M	P
Cathrine LaFrance	LP Newspaper	C	F	all
*Kathleen Lang	Sup. Ct 1	C	F	J
*Willie Lee	IN State Police	AA	M	J
Susan Lindgren	TRIAD	C	F	P
Kathie Matuszak	Madison Ctr.	C	F	T
*Fonda Mauch	Catholic Schools	C	M	P
*Jolene May	LP Hospital	C	F	T
Gloria Mayberry	Girl Scouts	AA	F	P
Essie	Voyagers	AA	F	P

McMillon				
Robyn McShane	YSB/Teen Court	C	F	P/J
*Larry Mitchell	LP School Police	C	M	J
*Dr. Chas. Motley	MD	AA	M	T
*Ben Neitzel	MCPD	C	M	J
Joel Pannell	Boys and Girls Club	AA	M	P
Ameenah Pasha	Swanson Center	AA	F	P
*Kris Pate	Healthy Families	C	F	P
*Scott Pelath	State Rep.	C	M	all
Don Peters	Recovery AA	C	M	T
*Bobbi Petru	Red Cross	C	F	P
Tricia Poort	TRIAD	C	F	P
*Mark Potrzabowski	SC Schools	C	M	P
Bonnie Quigley	LP Metro Ops	C	F	J
Deb Reason	LP Co Schools	C	F	P
Sharon Redding	Swanson Center	C	F	T
*Kandace Rice	Com. Corrections	CF	F	J
*George Ritter	Sheriff Dept.	C	M	J
Celeste Robinson	LP Co. Schools	C	F	P
Bonnie Schaaf	YSP/Teen Court	C	F	P/J
*Michael Seitz	LP Chamber	C	M	all
*Dr. Dennis Shawver	LP Schools	C	M	P
Jim Simon	Read LP Co.	C	M	P
*Neil Singleton	OP Fellowship	AA	M	P
*Charlotte Singleton	parent	AA	F	P

Problem Identification

Problem Statement #1: There is a serious problem within the county regarding community norms and attitudes about the use of alcohol, and a lack of family support systems that result in increased alcohol, tobacco and other drug use/abuse.

Supportive Data:

- Data from the IPRC LaPorte County Profile # 1 indicates the number of alcohol beverage outlets in LaPorte County was 226 or 2.05 per capita while the per capita number for Indiana is 1.67.
- Many community/religious festivals and functions are centered around or include “beer barns” as a drawing card and fundraiser. Some parents send confusing messages to their children by serving alcohol at graduation parties and others believe allowing their children to drink at home is a safe option.
- Alcohol annual spending totaled an average of \$422 per capita according to the Profile.
- Michigan City Police report in 2004 136 OWI arrests, up by 33, and total alcohol related arrests 333, up from 273 in 2003. There were 378 alcohol related arrests by the Sheriff’s Dept. in 2003 that was down slightly to 351 in 2004. LaPorte Police report 242 OWI and total alcohol related arrests at 411.
- County wide juvenile arrests and referrals are higher (117) for alcohol than for drugs (80).
- Swanson Center’s 2004 treatment data reporting 1018 clients of all ages were treated with alcohol related problems.
- Stepping Stone Women’s Shelter indicates of the 93 clients accepted in 2004 83% were substance users/abusers with alcohol being the most preferred drug.
- Alcohol related accidents were almost 10% of all accidents reported by the Sheriff’s Dept. but this information was not included in the other police department reports.
- One 2002 state study indicates that the LP County estimated fatalities involving alcohol is 33% and 25% have a BAC above .08.
- A 2005 Epidemiological study of NW Indiana reports that 19.4% of those seeking help for binge drinking were from LaPorte County, higher than Lake or Porter Counties, Indiana (15.1%) or nationally (13.7%). In addition this study indicates in LaPorte County 5.2% have driven in the past month after having too much to drink, 6.9% are considered chronic drinkers, (higher than all the above groups) and 6.8% of deaths per 100,000 died of chronic liver disease in 2002.
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Year 1 Update:

- **Unfortunately we have to report LaPorte County's attitudes nor public use have changed little in the past year concerning the use of alcohol.**
- **The RU study indicates that there are relationships between numbers of alcohol licenses holders in a county and alcohol problems. Data indicates that the number of license holders per 1000 population in LaPorte is 2.05 while the number for Indiana is 1.67. We continue to have community functions and festival centered around or include "beer barns" but we hope to make a dent in those over time. The Study highlights some serious indicators that our county's attitudes and use of alcohol and the problems they cause has increased over the past five years. LaPorte Hospital Stress Center has seen an increase of 144% in alcohol mentions in clients with the greatest increase with females of 350% from 2000 to 2005. Madison Center does not see such increases in alcohol alone but a substantial increase of 97% in polysubstance clients for treatment. This compares with Indiana admissions for treatment for alcohol of an increase of 14% between 2002 and 2004 and an 16% increase in alcohol with a secondary drug. Stepping Stone Women's Shelter client's drug of choice continues to be alcohol with smaller numbers of marijuana and new this year is amphetamine and several poly drug users. LPPD reports 526 calls for domestic problems in 2005, 464 in 04 with domestic offenses up from 127 to 143. Sheriff's Dept. reports their domestic calls at 423 up from 397 and offenses at 127 the same as 2004.**
- **Adult OWI arrests in 2005 in LaPorte City totalled 285 and alcohol related arrests were 507 compared to 214 OWI's and 411 in 2004. The Sheriff's Dept. showed an increase from 196 to 256 in OWI arrests over 2004. It also shows 428 total alcohol arrests in 2005 up from 310 in 04. The rate of OWI arrests per 1000 population was 7.92 for Michigan City and 8.65 for LaPorte. Our business study revealed one third of those reporting have been affected by alcohol problems with employees, 54% do not have an EAP and of those only 4 offer any help or referral, one third conduct random drug screens and the same number terminate those that fail. One third indicate interest in training for employers which we will follow up on this fall.**
- **Sadly, what we are seeing are indicators of serious risks continuing in our community resulting from the attitudes about alcohol use. Religious aspects affect these attitudes as some church groups have a long history of holding festivals with beer gardens an integral part of the event.**
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Year 2 Update:

- **Much of the above still applies.**
- **Alcohol continues to be the most used and abused substance by both LaPorte County adults and youth. RU youth studies of 18 year old recent graduates showed that alcohol was highly available and widely used both in and outside of all our high schools. Nearly all the youth admitted they had driven while drinking.**
- **Alcohol mentions at one treatment center were 49 compared to 31 for all the others listed for admissions. Another center reported 27 admissions for alcohol compared to 27 for all other drugs. One treatment center did not send stats.**
- **Domestic Violence calls in the city of LaPorte remained at the same number as 2005 and DUI arrests dropped by 3 to 222 in 2006. At the women's shelter 40 of 90 clients identified alcohol as their preferred drug. Out of 56 clients in Community Corrections 21 were there for**

- Data revealed that alcohol is highly available with 226 outlets in the county or a rate of 2.05 per 1000 population compared to the state of Indiana's rate of 1.67 per 1000.
- Alcohol related crashes for the county remain much higher than the state at 1.99 per 1000 compared to Indiana's 1.46
- The DUI arrest rates for the county grew by 24% between 2000 and 2005 and rose from 576 in 2000 to 965 in 2006. We have now been able to gather death records from the coroner that showed a drop from 5 to 3 in alcohol fatalities between 2005 and 2006. All alcohol and drug fatalities totaled 9 in 2005 and in 2006, but drug deaths increased by one while alcohol fatalities decreased by one.
- First time data from LaPorte Hospital ER admissions were listed at 44 for alcohol. This will serve as our baseline as we have not had access to that information

Objectives:

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- **1. Increase and support parenting skill programs including ATOD information parents can use with their children. Provide incentives to recruit parent involvement.**
- **2. Support formation of parent support groups to address problems such as condoning alcohol use at home, parent responsibilities and their own use.**
- **3. Support ATOD free activities for families. Promote life style change for entertainment.**
- **4. Mount an aggressive campaign to change community attitudes through enlisting schools, businesses and civic groups to adopt a "Values" and "Anti Drug Agenda" county wide**
- **5. "Market" youth use of ATOD facts and implement educational efforts to raise parent awareness and address their naivete through the use of the web site, monthly newspaper articles etc.**
- **6. Encourage high fees for beer tent licenses/ encourage other ways of adult fund-raisers without alcohol.**
- **7. Conduct a bi-annual Community Forum to enlist input and continue to identify problems and solutions.**
- **8. Publicize retailers that serve to underage youth and increase penalties.**
- **9. Support increases in alcohol and tobacco excise taxes.**
- **10. Increased support for law enforcement of existing laws/DUI patrols.**
- **11. Conduct compliance checks on retail establishments.**
- **12. Work with ABC Commission to insure accountability for beverage server licenses.**
- **13. Encourage increased assistance and support for families affected by alcohol and drugs.**

- **.14. Encourage and promote the use of a Parent-Teen Party Guide that supports a parent agreement to call one another, always be present and not to allow alcohol to be served at gatherings in their home.**

Year 1 Update:

- The objectives that have been met indicate our commitment to making a difference in LaPorte County and we intend to continue to work on the implementation of the remainder of our objectives during the next two years. With the Roosevelt Study in hand we will hold one or two work sessions this summer/fall that will use the information to define further actions and address its recommendations. Substance use and its impact on the workforce was identified as a major problem at a forum LaPorte City Chamber of Commerce held in October. As a result we conducted a survey of businesses across the county to find out the scope of the problems employers are seeing concerning alcohol and other drug use with employees. We will be releasing the data we gathered and make plans to sponsor workshops for employers to educate them about the problem.
- We wrote "The Partnership Perspective", a monthly news column starting in September, 2005 and were able to get it published in two of the county newspapers (the third one declines to print it). It targets parents and the community about alcohol and other problems teens face and provides tools and support for parents to be more involved in supervising their children's activities. and are including copies of those articles at the end of our plan. We provide tools for parents including the sale through collaboration with the County Health Dept. offices of 5 panel drug tests for parents to test their children if drug use is suspected and encouraging their use as a deterrent by keeping one in the home. 692 have been distributed in the four years we have offered them and they were free the first three years. We had simple alcohol tests available for sale for the past two years and just rolled out a multi use micro breathalyser for parents. We will now add a focus to sell them as a "Arrive Alive" PR effort. We wish to encourage all adults to use these as a means to reduce drunk driving.
- The LCC began to be actively involved in 2005 in the local Alcohol Beverage Board's licensing proceedings where it concerns smoke shops and convenience stores. We spoke in support of denying new licenses and have written a letter of protest to the Indiana Tobacco and Alcohol Commission when the local and Commission's denial for a license was overturned by a hearing officer in Indianapolis. We held a Youth Forum for high school students in March and plan to follow up with additional meetings with the youth at individual high schools in the fall. Continue to promote drug free events for teens and stronger prevention efforts such as Afternoons ROCK and a Boys and Girls Club prevention program. Our third annual public recognition program was held for the top police officers making DUI arrests across the county.
- A grant was funded to the In. State Excise Police in our area to pay for overtime to conduct compliance checks at targeted times such as proms, graduation, the county fair and holidays. The LCC annually sponsor Alcohol Beverage Server Training open to all 226 ABC holders to train their employees.

Year 2 Update:

- The efforts above continue. We contracted with Roosevelt University in 2006 for
- a Youth Study of Drug Availability, Perceptions, Attitudes and Beliefs Regarding Drug Education and Youth Derived Drug Prevention Solutions. This has been shared with the community at a town hall forum and creative options have been offered by the LCC to the schools to address many of the problems raised in this study. City and community wide family focused alcohol free activities have been on the increase with increased publicity.

Goals:

- To continue to address and change through the objectives the community norms by at least 10 % annually regarding underage drinking and the use of alcohol by adults.
- To continue to work closely with schools and community groups and to educate and raise parent awareness by 10% annually about underage drinking .
- To use the information gathered in the Roosevelt University Adult Study and Youth Study this coming year so we can identify 3 to 5 new actions/programs and fund those at highest priority to address the new and increasing challenges it has identified on the extent of the alcohol and other problems affecting our citizens.

Year 1 Annual Benchmarks:

- **THE PARAGRAPH BELOW APPLIES TO ALL BENCHMARK REPORTS ON EACH OF THE FIVE PROBLEM STATEMENTS IN OUR COUNTY PLAN.**
- . Please note that at present we are working from an approved County Plan submitted in 2005 without benchmarks. This makes it difficult to integrate specifics as you are asking for in evaluating our progress with the objectives in each problem statement. Over the next two years we will give an assessment of our progress, any data we see that indicates progress and when we write a new plan in 2008 we will be more specific on benchmarks.

Year 2 Annual Benchmarks:

- We strive to achieve a reduction in the use and abuse of alcohol and other drugs in this county in all areas, age groups and genders. We have no specific numbers or percentages at this time.
- We continue to strive to raise more community awareness so that together in collaboration with many agencies both public and private there will be a reduction in the use and abuse of alcohol and other drugs in this county in all areas, age groups and genders. We will hold a Community TownHall every other year with a youth forum on alternative years.
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Final Report:

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Problem Statement #2: There is a serious problem in gathering, distributing and increasing public knowledge about factual information and statistics related to ATOD use

and abuse in LaPorte County. A high priority was given to the community norms of adult alcohol use by the 2005 Community Forum.

Supportive Data:

- There has not been any effort in the past to conduct a full county assessment as to the extent of substance use and abuse.
- There is no central data collection site in the county beyond what the LCC collects for the annual county plan.
- Only a one of our county school corporations have conducted student ATOD surveys in recent years that we are aware of.
- We were informed that most of the schools have conducted a “needs assessment” this year, however, as of this time there has been no information shared with the LCC.
- Law enforcement keeps records and share their data but many do not keep all that is relevant to our purposes.
- Emergency Rooms at the two local hospitals have not been forthcoming with their substance related data despite requests.
- Two of the three outpatient treatment centers, Madison Center and Stress Center at LaPorte Hospital did not respond to requests for AOD data .

Year 1 Update:

- **The first step we made in addressing the problem of gathering and distributive information related to AOD was the hiring of Roosevelt University to conduct an in-depth study of LaPorte County's substance abuse. All drugs and alcohol are covered in the study with the exception of marijuana which the researchers would not include as they stated it is the "only one whose use does not cause death".**
- **There continues to be resistance from the school officials to all outsiders to survey students but we are approaching them once again with another proposal to apply for a SAMHSA prevention grant in 2007 with the understanding that the schools would do surveys for evaluation purposes. If they choose not to assist us we may not write the grant or may approach student research through other means. Roosevelt University is preparing a proposal for the LCC to use student focus groups outside of school to gather youth behavior trends and depth of their drug knowledge.**
- **We have approached emergency rooms in both hospitals with information about DAWN (Drug Abuse Warning Network), keeping those type of records for us and are still working with them about their privacy concerns. We believe we will soon overcome their reluctance to help us.**
- **Plans are under discussion about when and how to release the information from the Roosevelt Study as well as the Business Survey in order to create the greatest impact on community/parent awareness.**
- **The Partnership Perspective news column has been received with some positive feedback from readers however, we are in a real dilemma as to how to get it out to the readers of the LaPorte Herald Argus that reaches approximately 1/3 of the county. This newspaper chooses not to publish the Perspective. We do have it printed monthly in the Michigan City and Westville Indicator, a small weekly paper reaching south of the county and some information on occasion in a free bimonthly magazine that is distributed through many locations in the county and in some school take-home newsletters.**
- **Plans are under discussion about when and how to release the information from the Roosevelt Study as well as the Business Survey in order to create the greatest impact on community/parent awareness.**
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Year 2 Update:

- **The Partnership Perspective monthly column now reaches the entire county through an added monthly publication called THE LOCAL which is mailed to all LaPorte residents and column is included in some elementary and middle school parent newsletters. We have published several guest editorials and advertised on one local radio station. The Coordinator has made four radio appearances regarding the LCC.**
- **We have achieved two major breakthroughs for the first time in getting data on alcohol/drug related deaths from the coroner and one of the two hospitals Emergency Room data from 2006. We had two of three treatment programs share their annual stats this year. We still need them all.**
- **We have released the two Roosevelt University Studies data through a Community Townhall in April and raised considerable awareness about the findings. We believe having RU conduct our studies has given more respect and credibility to our message to the community.**
- **Some but not all relevant agencies have responded by providing us with their annual reports on AOD issues.**



Final Update:

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Objectives:

- 1. Have the LCC be considered as THE AGENCY to gather data on ATOD use within the county and to update and store this information.
- 2. Urge the local hospitals to join the DAWN national network for emergency room calls if appropriate. Collect data from both emergency rooms as to AOD related admissions.
- 3. Publicize the data collected to help address problem of community/parent awareness.
- 4. Present crime statistics to community to demonstrate the effect of AOD abuse.
- 5. Encourage schools to conduct yearly surveys and to share the results with the community.

Year 1 Update:

- 1. The Roosevelt University Study is about to be released. In it the Study suggests that the LCC should serve as the designated agency to gather and store such data as we have in the past.
- 2. We are working with the hospitals as have the RU researchers so we are optimistic we will have their ER data next year. We also need to convince the coroner to keep AOD death stats and share those.
- 3. All new pertinent data will be released to the public with the next few months from both the RU study and the business survey.
- 4. The Study and business survey will be used in the next 3 months to determine where we need to focus our efforts and how to move forward.
- 5. We continue to encourage the schools to help us by conducting yearly surveys. Two years ago we hosted meetings between the schools and LCC to offer to cooperatively apply for outside grants to fund a county wide drug curriculum for all 7th and 8th graders without There was no interest.
- 6. In April, 2005 we offered to bring the DUI SAFETY BUG program to all county high schools in spring 2006, asking only that they give us available dates, the use of their parking lot and help with some adult supervision. We set aside funding and offered to pay all costs involved. Then later we approached the school corporation superintendents last August with the same proposal. So far there has been no positive response or indication of interest. We continue to try to work with school authorities.

Year 2 Update:

- Through the two Roosevelt University Studies the information given to the public is viewed with much higher credibility and we are achieving a greater public awareness of our coalition, the problems the county is facing and the efforts we are making. We continue to inform all the community that we should be and are THE agency to keep the statistical data on substance abuse.
- The schools simply could not walk away and ignore these new Youth Focus Group Studies and the serious lack of drug education as perceived by the youth. We offered a number of creative options to the schools to help improve their drug education and are awaiting their response to our proposals. They do not seem inclined to conduct student surveys but we will gather data from youth focus groups in the future.
- Cooperation has opened up with the County Coroners's office death records they provided and one hospital for emergency room records on substance abuse issues we have been shared for the first time. We hope to get the other hospitals on board with us by next year.
- More agencies have provided us with more complete data than ever.
- One idea we are discussing is to go to the County Commissioners and ask them to declare that the LCC will serve as the official ATOD data and statistical site for the county.
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Final Update:

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Goals:

- To raise awareness by at least 10% through a more aggressive campaign to educate the public about substance abuse and its problems across the county
- To have the LCC perceived and designated to serve to gather and store data about AOD use and abuse in LaPorte County.
- To have both of the area hospital emergency rooms keep records similar to DAWN and share them with the LCC.
- To include a representative number (25%) of area school middle and high school students (9300) in our data collection efforts and to gather that data annually.

Year 1 Annual Benchmarks:

- Specific benchmarks will be addressed in the new 2008 County Plan.
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Year 2 Annual Benchmarks:

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Final Report:

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Year 1 Update:

- **The Roosevelt University study states "The number of alcohol mentions in these entering treatment under 30 years old represented 13 percent of the total alcohol mentions in 2000, while in 2005 those under 30 represented more than a third of the total alcohol diagnoses. "One fourth of Swanson Center mentions in 2000 were under 30, which increased to over 35 percent in 2005. This data suggests that youth alcohol misuse has become an increasing more prevalent problem in LaPorte County over the past 5 years." · The report continues "Most notable is the large increase in the below 30 treatment population. The recent shift towards younger treatment mentions is alarming and warrants assessment and reform of current drug and alcohol education in the schools. Both treatment center data sets indicate large increases among many individuals, demonstrating that alcohol affects communities of all ages." One statistic that stands out is the increase in treatment between 2000 and 2005 of alcohol mentions in clients under age 18, up by 100% at Swanson Center and by 1200% at LP Hospital Stress Center. The Sheriff's Dept. lists 18 OWI juvenile arrests in 2005 with none in 2004 and arrests for violation of ABC acts have more than doubled from 26 in 04 to 66 in 2005. Juvenile Probation is reporting AOD referrals at 181, OWI 22, marijuana 47 and other drugs 8, totalling 250. They made a total of 1757 referrals (not actual kids). This is down from 2004 referrals 1812 and 395 AOD related. All county public schools conducted a health survey in March of 2005 on 100% of their 8th and 10th grade students. All the schools released their data except Michigan city. There were fifteen questions of which seven related to student substance use in the past six months. The schools report the results as follows: Students who have smoked cigarettes- 8th grade 30% 10th grade 44%. Students who have used smokeless tobacco- 8th grade 8% 10th grade 36%.**
- **Students that have used marijuana- 8th grade 19%, 10th grade 36% . Used illegal drugs in past 6 months- 8th grade 20%, 10th grade 26%, Come to school under the influence AOD- 8th grade 12% 10th grade 19%**
- **Purchased illegal drugs at school- 8th grade 12%, 10th grade 17%**
- **Used alcohol in past 6 months 8th grade 38%, 10th grade 66% This school survey compares closely with the data we had last year on teen substance use. Comparing local use reports with those of the 2005 Indiana Youth Risk Behaviors all Indiana 9-12th grades show slight decreases in ever used alcohol from 77.8 to 75.09 and currently using down from 44.9 to 41.9. Note LaPorte's 10 graders report significantly higher stats using past 6 months at 66% . Indiana reports 18.9 currently use marijuana, 38.7% have used in their lifetime (ours are comparable here at 36%) and 28.9 have gotten illegal drugs at school. It appears our schools are doing a good job in curbing illegal use/distribution at school. From data released in the newspaper reporting of ISTEP results in 2005 we note in middle schools the general expulsion rates have dropped showing results with some new intervention programs such as Project Ed.. Totals countywide show 114 expulsions from AOD/weapons in all grades in 2005 compared to 93 in 2004. High school and elementary numbers have dropped slightly but there has been an increase from 31 to 49 AOD/weapons for middle schools for all school corporations.**

Year 2 Update:

- **The number of suspensions/expulsions from drugs/alcohol/weapons in LP secondary schools was 74. up from 34 in 2004/05 . At Michigan City**

- The RU Focus Group Study only confirmed that our youth continue to use alcohol and other drugs both in school and out of school since we have no school survey data to draw on. Across the board the participants said their drug education is seriously lacking and without credibility and the researchers have made a number of excellent recommendations for change. The Partnership has offered many suggestions to support and assist the schools to implement these recommendations and to give our students more credible drug information as well as providing a concerted effort in continuing and improving parent awareness. In 2006 we have provided 214 inexpensive drug and 200 breathalyzer tests for parents/adults to use with many positive comments. The Youth Making Moves teen advisory group has been given support and encouragement with a new adult leader and there is cause for optimism the group will become more active. The template does not allow adequate space to report the data and progress that you ask for. Our two scholarships for seniors focuses on rewarding those young people who work for and remain drug free.

Objectives:

- • **1. Encourage and support community efforts for after school and summer program activities such as but not limited to YMCA, Safe Harbor, Afternoons ROCK, drop in centers, martial arts, summer recreational programs. Continue to add “fun” to the prevention message**
- • **2. Support and fund “Youth To Take Action”, sponsored by the LCC, to plan and implement ATOD free youth activities throughout the county.**
- • **3. Support increases in the use of evidence based prevention curricula for upper elementary and middle school students and give priority to fund those prevention programs that contain proven strategies and are model programs.**
- • **4. Support intervention and treatment alternatives within schools for youth ages 14 to 18, such as but not limited to student assistance programs, Project Ed and MAP.**
- • **5. Conduct a bi-annual Youth Forum *at each high school to listen to our youth for creative ideas and programs concerning their views of the problems and solutions about ATOD use.**
- • **6. Address the transportation needs of many youth to enable them participate in programs and activities.**
- • **7. Mount and fund underage drinking campaigns targeting events and groups such as but not limited to prom, graduation, driver’s ed classes, and education programs such as College Safety and Survival presentations.**
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Year 1 Update:

- A new youth advisory group was activated this year with approximately 12 youth participating. They planned and sponsored a Halloween Dance, attended the IN. Youth Summit, held several Open Mic nights and helped to plan and attended a Youth Forum to work on youth issues. We are now exploring the idea of holding individual forums at each high school after school next year to further involve and activate the youth into developing their own solutions. In addition to financial support for the group the LCC provides adult leadership by paying an adult a small stipend to work directly with the youth group. We funded grant monies for other youth programs including expansion of Afternoon's ROCK, Boys and Girls Club anti drug programs, assisted two schools with alternative education/intervention programs for youth, supported driver education programs with a new anti drinking/driving power point presentation county wide, supported inner city additional youth scholarships for after school fitness, called "An Alternative to Drugs", supported Red Ribbon activities for all grades, for the first time awarded two college scholarships for graduating drug free students who will publically pledge to remain so during the next school year.
- Our DUI Impact and Focus Task Force have been planing educational activities associated with prom and graduation and twice we offered to facilitate and fund bringing the DUI Safety Bug to all county high schools. The schools indicated no interest both times. The Partnership Perspective newspaper column began in September, 2005 and was published in Michigan City and Westville for the south county. This has been primarily targeted to the parent/community in an effort to educate them as to the realities of teen age behaviors and risks they face. We continue to address many related AOD topics such as inhalants, alcohol, drug testing, parent quizzes on what to watch for in their teens, etc.

Year 2 Update:

- We recruited new adult leadership last year for the Teen Advisory Group and Teen Nights for one further push to get this program more active.
- We supported with a grant a similar new intervention program to the highly effective Project Ed for New Prairie HS students .
- We focused our Red Ribbon activities through grants to schools that allowed them to create their own programs and activities.
- Presented two graduating high school seniors with a scholarship recognizing their anti drug activities and started a scholarship for under priviledged youth to participate in TaeKwonDo classes.
- The Partnership Perspective has added one more publisher, THE LOCAL monthly paper that is delivered to all LP homes and will be providing the 22nd monthly column in June. This column uses its space to raise awareness and provide information for parents to use with their children. Copies of some of the columns are attached to this report.
- Offered the schools a list of significant ways we are willing to assist with improvement in drug education both in and outside schools.
- We spent time and money to write a proposal for the state SPFSIG grant but were not awarded one.
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Final Update:

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Goals:

- To reduce the use of AOD by LaPorte County youth by 5% annually to a level at or below those of the state and the nation.
- To explore applying for a SAMHSA prevention grant for the county in 2008 providing we can obtain the schools cooperation in surveying students so that we can have sufficient data to use.
- To explore alternative methods of gathering data about youth substance use behavior.
- To use the Roosevelt Study and other county information to annually inform , educate and motivate to change at least 10% of the public about youth substance use and all substance abuse problems across the county.

Year 1 Annual Benchmarks:

- Benchmarks were never set when the plan was written in 2005. Our goals are our benchmarks for this county plan
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Year 2 Annual Benchmarks:

- Same as above

Final Report:

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Problem Statement #4: The use/abuse of alcohol and other drugs places a tremendous burden on law enforcement and the courts of LaPorte County. This results in overcrowding within our jails, probation departments and juvenile facilities and is reflected in the problems we see with our youth.

Supportive Data:

- In 2004 there were a total of 4395 jail bookings, 3135 arrests (adult and juvenile), and 2801 warrants issued. These are up from 2003. The number of inmates in the jail with substance abuse related offenses is dramatic. On May 24, 2005 there were 258 inmates. Of those 158 or 61% were incarcerated directly because of alcohol or other drugs. This does not include those with theft or robbery that committed those crimes because of drugs. It would be very safe to say over 80% of the jail population is AOD related.
- Juvenile Probation handled 1812 referrals in 2004 from various police departments, parents and schools, down slightly from 2017 in 2003. The referrals ranged in youth ages 7 to 18 years with the greatest numbers age 15. 68% were male and 35% were African American. 61% were repeat offenders and 297 were placed on Official Probation with 23 on Informal Probation. Nearly one fourth or 395 were alcohol or other drug related.
- LaPorte Metro Operations had 492 cases and confiscated drugs with a street value of \$378,885 resulting in 181 arrests and 121 warrant arrests in 2004.
- The three county major police departments reported 1035 alcohol related arrests and 228 drug related arrests.
- There were 1327 domestic and disturbance calls in MC, 989 in the Sheriff's Dept. and 855 in LaPorte last year.
- Stepping Stone Women's Shelter data reflects a direct relationship between domestic violence and AOD.
- Substance use by LaPorte County youth is well documented in Problem Statement # 3.

Year 1 Update:

- ***** We did not receive annual reports from some agencies as we have in the past. Our request for their data were made in mid January and then again in March. We did not receive annual reports from Michigan City PD, Metro Operations, any of the adult probation depts., the Juvenile Services Center, any treatment centers in the county and any of the schools. Undoubtedly this may be because of RU's research activities within the county. RU did obtain some data we have never had before and there are others such as the county coroner and emergency rooms that did not comply to either RU or our requests. As a result we are using information from the RU study and the reports that were provided to us. The Sheriff's department reports the statistics continue to spiral upwards from 4395 jail bookings in 2004 to 4934 in 2005. Adult and juvenile arrests increased from 3135 in 04 to 3460 in 2005. What is most troubling about these is that the number of juveniles rose by 22% from 198 to 242 and adult arrests rose by a similar percentage. Alcohol related accidents increased by 15% to 114, however, fatalities dropped by 26% which is very good news. LaPorte City Police reports 1573 arrests in 2005 compared to 1305 in 2004 and juvenile arrests this year at 374, a drop of 10 from 2004.. Noted in the RU Study DUI arrests in Michigan City last year were down from 2000 by 25% from 207 to 155 but up by 43% in LaPorte City from 214 in 2000 to 305 in 2005. One question arises we will be looking at and that is the "why" between the two cities especially when Michigan City population is greater by about 10,000. OWI arrests rates per 1000 population for the two cities rose from 7.92 in 2000 to 8.65 in 2005. The RU study concludes that alcohol remains an increasing community problem that is "persistent and pervasive". Treatment admissions for alcohol have steadily increased since 2000. Alcohol mentions increased at two of the three treatment centers by 144% and 180% from 2000 to 2005 and of the 141 clients admitted by the third center, 58% showed diagnoses of comorbid combining drug addictions with mental health problems. It is no wonder the arrests have increased and our criminal justice system is overcrowded and even overwhelmed at times.**
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Year 2 Update:

- **DUI arrests for the county in 2006 were up from 794 to 965 with the largest**
- **increase in Michigan City. We believe our annual police officer recognition program has increased enforcement in those cities that had not made it a priority. Treatment admissions for alcohol at one hospital emergency room (new stats for the first time) were 44 for alcohol including 35 classified as addiction while all drugs admissions totalled 32. Alcohol related fatalities in our county continue to be a high percentage of the total in the state according to IPRC. No data was provided from juvenile probation/facility this year.**
- **LaPorte PD reports 17 undercover drug cases total valued at \$32,978. LP offenses were 400 less than 2005, with DUI's down from 225 in 2005 to 196 in 2006. Domestic violence calls remains static and the largest drug offenses were marijuana possession. With the two R.U. studies we have had done this year we finally have a true base line to work with toward making a real impact in our county. Arrests at LPHS in 2006 totalled 24 youth and 1 adult, with 88 cases investigated. A Roosevelt University study on data from 2000 to 2005 show increasing huge increases in alcohol mentions in all races, ages and genders especially high in younger females. Cocaine arrests have remained nearly the same in distribution +4% and down for possession by 39%.**

- LP Co. Metro Operations seized 435.5 grams of cocaine, 41.49 pounds of marijuana and 24 scheduled substances in 2005 (most recent report). Heroin has begun to show up here. Diverted pharmaceuticals are an increasing problem in both youth and adults
- Community Corrections reported a total of 59 inmates the program for alcohol (22) and or drug offenses. Home detention showed 28 clients in for DUI and 21 for drug offenses. Juv. arrests by Sheriff's Dept. rose by 29% in 2006.

Objectives:

- **1. Investigate if there is consistency in county sentencing practices and encourage courts to develop countywide guidelines.**
- **2. Support the establishment of a drug court for youth and for adults.**
- **3. Support funding for literacy education, and assistance for indigent, homeless, elderly and incarcerated citizens.**
- **4. Support funding for additional treatment options for citizens.**
- **5. Research, advocate and promote best practices guidelines for AOD sentencing.**
- **6. Promote sentence reform within the Dept. of Corrections to address substance abuse treatment at earlier stages in the criminal justice cycle.**
- **7. Monitor the activity and influence of violent, criminal organized gangs who may be bringing drugs, including meth, into the county.**
- **8. Increase awareness by retailers and farmers about the products that are used to manufacture meth.**
- **9. Support tougher consequences for juvenile offenders to help change behaviors early on.**
- **10. Advocate for and encourage the use of ignition interlocks for convicted DUI offenders.**
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Year 1 Update:

- **Efforts are underway to explore the possibility of a drug court in LaPorte County. We have one or two judges supporting the concept but a prosecutor basically opposed (who also believes and states openly that marijuana should be decriminalized and is not a real problem). There will be several changes in judges in 2007 so it would be good timing to start a court as new ones are coming on. It is difficult to determine how successful the effort will be. The LCC has pledged financial support to help in its first year. We funded scholarships for inmates who wish to participate in the new jail treatment program but cannot raise the \$450 required for each person. We have funded grants to support other jail treatment for the past five year. We are funding new grants for literacy programs within the jail population this year and encourage courts and other treatment options where possible. By providing grant money last fall to the LaPorte City Police for a meth awareness program we were out in front of addressing the problem that to date has not been a serious one in our county.**
- **Our LCC was also one of the recipients of an Indiana grant on meth awareness in 2002. We financially support AA programs within the Community Corrections program believing that these offenders need to work on their addictions while serving their time. Through our Justice Committee who all work in the justice community we continue to advocate for and encourage program that include ignition interlocks, tough consequences for juvenile offenders as well as intervention. The Treatment Committee is dedicated to finding and helping to fund additional treatment options in the county including a residential program.**

Year 2 Update:

- **We attended meetings on Drug Court and organized a visit to Porter County Drug Court with court officials. However, with changes in several judges including Circuit Court there does not seem to be any serious movement at this time that we are aware of to start Drug Court here. Alcohol breathalyzers are offered to the adult community to help reduce citizens driving impaired.**
- **We continue to fund grants for in-house treatment and literacy and mentoring programs within the county jail. We also support AA programs and substance abuse counseling at Community Corrections and in the community. Literacy for the general public will be addressed in 2008 with a grant to assist that program.**
- **By adding more than 50 new informational community members to the LCC we are reaching beyond the typical justice membership to raise awareness and access new opportunities such as a recent offer by Purdue University Extension staff to teach classes at the jail on home and money management and a new affiliation with Figment Group that does workplace drug testing and referral. We will be working more closely through PU Extension. to raise awareness with farmers about meth.**
- **Our annual Police Officer Recognition Program appears to encourage additional DUI enforcement especially in towns that had not made it a priority.**
- **Some courts do use Ignition Interlocks but others do not.**
- **There are some indications the gang problem may be making a comeback in the area which we wil monitor closely.**
- **The six community pill drops are being partially funded by our grant**



Final Update:

Goals:

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- **To see a drug court established in LaPorte County in 2007.**
- **To support at least one new treatment option for citizens along with or rather than jail time.**
- **To support the establishment of a residential treatment program in LaPorte County.**
- **To reduce the burden of law enforcement and the courts by lowering by 5% the high number of alcohol and other drug offenses in the county.**

Year 1 Annual Benchmarks:

- **No benchmarks were ever set when this plan was written in 2005**
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Year 2 Annual Benchmarks:

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Final Report:

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Problem Statement #5: There is a continuing need for increased ATOD treatment options, resources and funding for both adults and youth in the county

Supportive Data:

- There is significant documented ATOD use/abuse in this county and many of those needing help do not find any treatments options available or affordable.
- The county is in the top 10% in Indiana in both African American and Hispanic populations and in the bottom 10% in per capita increases in income levels. Unemployment rates are higher than in the state and nationally and one third of the households have only one spouse according to the IPRC LaPorte County Profile # 1 out in 2004.
- The county has a higher percentage of auto crashes involving alcohol than the rest of the state. These circumstances can indicate or lead to substance abuse and a need for treatment.
- LaPorte County Metro Operations (undercover drugs) handled 492 cases in 2004 with a street value of \$378,885, down, however, from 586 cases in 2003. Arrests were closely divided between white (143) and black (158) citizens with Hispanics, 11.
- In the Problem #3 Supportive Data we have presented documentation on the use of substances by our youth at a higher rate than across the state and nationally.
- A total of 1032 youth were sent to the Juvenile Services Center in 2004 in the secure side, under home monitoring and to residential sections. Of those 75 were directly involved in alcohol or drugs charges/arrests including one with cocaine.
- The Juvenile Probation Department handled 1812 referrals involving 946 juveniles, 335 females and 611 males. Of those 395 were for AOD.
- Michigan City Police reported 273 adult arrests for alcohol violations and 163 for drugs. LaPorte PD reported 411 alcohol arrests and 37 for drug possession and the Sheriff's Dept. 351 arrests for alcohol and 28 for drugs. This totals 1053 alcohol related arrests and 228 for drugs.
- The treatment options available within the county include the Swanson Center, Madison Center (South Bend headquartered), and Stress Center at LP Hospital. The Behavioral Health Center at St. Anthony Hospital closed last June allegedly because of financial concerns. There are no long term residential programs.

Year 1 Update:

- **With some serious threat risks defined by the Roosevelt University Study being presented June 7th our focus on treatment must be paramount. Our 5 problem statements are so interrelated and are so dependent on one another and the supportive data in each of them applies to them all. The county remains in the top 10% in African American and Hispanic populations as well as the bottom 10% in per capita increases in income levels. The above issues, unemployment, and the number of single parent families all may contribute to the reported mental health problems and subsequent alcohol and drug abuse. These are demonstrated by the 58% comorbid diagnosis of clients in one of our treatment centers. The RU Study indicate pharmacological opiate seizures rose 236% between 2001 and 2004. Cocaine in grams seized in LaPorte City have risen from 596 to 3228 and in Michigan City from 982 to 1542 since 2004. Treatment data at one hospital shows an increase of 460% of cocaine mentions since 2000 but they were down from 74 in 2004 to 56 in 2005. Mentions at HAP rose from 48 to 61 and at another center were up from 2004 from 33 to 48 with the greatest increases in ages 21 -29 up 66 %. Another disturbing trend is that the female use of all these substances is increasing dramatically. Opiate mentions at one treatment center were down from 51 in 2004 to 44 in 2005 but up from 2000 by 1367%. Unduplicated methadone patients from LaPorte County have increased from 11 in 2000 to approximately 100 in 2005. With these numbers this means we need a Methadone Clinic in our county. The county's most serious pervasive and problem seems to be alcohol abuse and addiction. One treatment center reports an increase from 70 alcohol mentions in 2000 to 171 in 2005 (down slightly from 174 in 2004). Another lists 101 mentions for alcohol in 2000 to 281 in 05 about the same as 283 in 04. .**

The Business Substance Abuse study also indicates employers are seeing increasing problems occurring in the workforce with all substances particularly with alcohol. They indicated it is costing the businesses not only in lost days, damaged equipment, poor morale but in difficulties in finding qualified drug free people to hire. We were told one large retail outlet opening last year had to dispense with its drug testing for new employees in order to hire enough people to open the store. The bottom line is that LaPorte County has serious substance abuse problems. and sadly they are not getting better despite the efforts of many. They seem to result from very long standing community and even some religious norms that regard alcohol use and overuse as acceptable, poor economic situations, single parent families, high minorities populations, lack of family support systems, many two parents working, a less than vigorous drug curriculum being taught in schools and a national culture that sells youth and adults life is more fun if you drink and anything can be fixed with a drug.

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Year 2 Update:

- **The RU Study quoted above reveals the serious need we have for additional treatment options. Additional data shows the following: LP Hospital ER had 44 admissions to the Stress Center for alcohol, and 32 for drug emergencies. Stepping Stone Women's Shelter revealed 90 admissions in 2006, 40 identified alcohol as their drug of choice and only 37 said they had no drug of choice. Marijuana was the second drug preference listed. In a 2006 RU Focus Group high school graduate study found extensive use of alcohol and availability of most illicit and prescription drugs both in school and outside. They found their**

- drug education seriously lacking in every area including effects of mixing alcohol and other drugs, overdosing symptoms and response, credibility of those teaching and drinking and driving. The myriad of problems of underage drinking that ensue and also leads to what is already seen coming into the treatment facilities, the increasing numbers of those under 30 and females.
- LP Stress Center showed 5 admitted for marijuana, 49 alcohol, 9 sedatives, and 18 for cocaine.
- With the number of arrests and incarceration increasing by law enforcement it shows what a great need there is for increased treatment and the establishment of a drug court. One judge supports it but the others and particularly the prosecutor do not.
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Objectives:

- **We have achieved some of our objectives set in 2005 but there is much to do.**
- **1. Advocate for a long term residential treatment center with a family component.**
- **2. Highlight and promote employee assistance programs within the county business community.**
- **3. Work with law enforcement/pharmacies/medical community to address concerns of prescription abuse including the elderly and youth getting drugs from medicine cabinets at home.**
- **3. Support the study of substance abuse problems in the elderly population and provide ATOD information, education and treatment for this age group.**
- **4. Expand juvenile treatment services at the juvenile facility**
- **5. Promote community treatment, not court ordered.**
- **6. Promote best practices for schools in dealing with student abusers ie. student assistance programs.**
- **7. Monitor and support legislation granting counties approval that can document the need to have a methadone clinic.**
- **8. Enlist an outside agency to collect statistical data on ATOD use in this county and designate an agency to update and store this information.**
- **9. Urge the two local hospitals to join the DAWN national network for emergency room calls. Collect data from emergency rooms as to AOD admissions.**
- **10. Promote best practices in current and future treatment modalities.**
- **11. Advocate and support the creation of drug courts to help appropriate offenders get treatment rather than incarceration.**
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Year 1 Update:

- **Treatment Committee members continue to advocate and work for residential treatment even though the prospects appear remote.**
- **With the business study recently completed the LCC will soon be sponsoring workshops to address the need for drug testing employees and employee assistance programs.**
- **We have supported Juvenile Services programs for girls by the Singing Sands Girl Scout Council.**
- **Our legislative survey to the Commission has indicated support for a methadone clinic in our county.**
- **Roosevelt University Institute for Metropolitan Affairs was hired in the fall and is presenting their research on the alcohol and other drug problem in LaPorte County at the June 2006 LCC meeting. Their executive summary and recommendations will be closely examined to explore ways to implement their findings.**
- **Initial contacts have been made with both hospital emergency rooms to enlist their support for data keeping and we believe this cooperation will be forthcoming later this year.**
- **And we are participating on an exploratory committee to establish a drug court.**
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Year 2 Update:

- **We made big steps forward in collection of data by gaining the cooperation from one of the two hospitals in the county on emergency room admissions and from the coroner.**
- **We held a town hall in April to publically release all the information gathered in the County Multiple Analysis and Youth Focus Group Studies contracted with Roosevelt University. This data gives us good base to see what needs to be done and how we are doing.**
- **We submitted a grant proposal for SPFSIG in April but were not selected. We will use this effort as a base for applying for a SAMHSA grant in 2008. Treatment is a critical issue and we are supportive of all programs.**
- **We welcome a new adolescent residential center coming to Porter County which would be convenient for LaPorte citizens.**
- **For the first time we celebrated and focused on Recovery Month in September with a booth at the Sunflower Fair and will enlarge on that effort this year.**
- **We offered businesses training opportunities on substance abuse programs for their employees. Though our 2006 survey indicated businesses have many problems with employee substance abuse only one business attended.**
- **We support the establishment of a Methadone Clinic in our county as the number of patients on methadone here rose from 5 in 2000 to 107 in 2005.**

Final Update:

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Goals:

- **To increase treatment options for all citizens including residential.**
- **To educate 35% of the business community this year in better practices to intervene and encourage, where practical, employee assistance programs.**
- **To use the data provided in the Roosevelt University study to better address the problems and implement three of the new recommendations they have made.**
- **To have the two hospitals gather the emergency room data we should have available.**
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- **To engage the county coroner's help so he will keep and share records on substance related deaths.**
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Year 1 Annual Benchmarks:

- **There were no benchmarks set when the plan was written.**
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Year 2 Annual Benchmarks:

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Final Report:

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Please attach the County's Fiscal Report for review!

Next Annual Update Due: June 2008

Next Comprehensive Community Plan Due: June 2008

Date of Community Consultant Review: July 26, 2007

Disclaimer:

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

Terms and Conditions:

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

Initials: LK

LAPORTE County

LOCAL DRUG FREE COMMUNITIES FUND INFORMATION

(1) Amount deposited into the drug-free communities fund during the most recent, complete calendar year, per the County Auditor:

- The LaPorte County Auditor's office deposited **\$122,840.00** into the LCC's Drug-Free Community Fund from fees collected last fiscal year, 2006.
- **\$15,348.67** rolled over from unused funds from the previous years.
- \$138,188.67 total amount available for programs and administrative costs for the upcoming fiscal year.
- \$28,140.00 allocated for administrative costs leaving 110,048.00 available for the upcoming year for programming

(2) Fund allocation by category, including a brief description of the purpose of the grant funding:

APPLICANT/PROJECT & PROGRAM description	AMOUNT REQUESTED	AMOUNT AWARDED
Prevention/Education		
New Prairie Schools Alternative to Expulsion	\$7,000.00	\$6,000.00
Project Ed, LaPorte Schools- intervention	\$10,000.00	\$6,500.00
New Prairie Afternoons ROCK	\$2,110.00	\$2,500.00
Youth Service Bureau- After School Program	\$3,000.00	\$2,500.00
Midnight Basketball inner city program	\$6,675.00	\$1,800.00
Special Program (SP) LCC Teen Nights, activities	\$500.00	\$500.00
SP LCC Scholarships graduating seniors/TaeKwonDo	\$3,190.00	\$3,190.00
SP LCC Youth Advisory Board	\$1,000.00	\$1,000.00
SP LCC Red Ribbon Week Grants to schools	\$2,000.00	\$2,000.00
Open Door Clinic, Healthy Lungs, tobacco patches	\$7,500.00	\$2,000.00
LaPorte County Schools, Ready to Resist, resources	\$5,160.00	\$5,000.00
TOTAL(S)	\$48,135.00	\$32,990.00
Treatment/Intervention		
PACT, resources/materials	\$600.00	\$600.00
Prenatal Substance Abuse. staff support	\$7,500.00	\$7,500.00
LP Co. Jail Treatment fund indigent fees	\$7,500.00	\$5,000.00
YANA addiction recovery support	\$5,090.00	\$3,500.00
Community Corrections in house treatment/counseling	\$4,968.00	\$5,000.00

Kente, Urban Recovery Experience, minority family	\$7,000.00	\$3,805.00
LP Co. Jail Literacy/Mentoring, reading and GED	\$7,500.00	\$5,000.00
TOTAL(S)	\$40,158.00	\$30,710.00
Criminal Justice Services		
LP Teen Court, intervention youth in trouble	\$7,500.00	\$6,000.00
MC Teen Court, same	\$7,500.00	\$6,000.00
LPPD Metro Supplement, addition drug buy funds	\$7,500.00	\$5,000.00
LP Co Metro Operations, drug buy funds	\$7,500.00	\$5,000.00
DUI Underage/Adult DUI progra,s	\$4,880.00	\$4,000.00
LP Co Sheriff Dept. added PBTs	\$5,574.00	\$5,000.00
TOTAL(S)	\$40,454.00	\$31,000.00

(3) Total amount of dollars allocated with percentages:

CATEGORY	Percentage	DOLLARS APPROVED
Prevention/Education	27	\$32,990.00
Treatment/Interdiction	25	\$30,710.00
Criminal Justice Services	25	\$31,000.00
Administrative	23	\$28,140.00
TOTAL(S)	100	\$122,840.00

(4) Describe the grant process and requirements for the grantees:

The requirements to be eligible to apply for a grant are attendance at nine of twelve LCC meetings in the previous year and participate on at least one LCC committee. Five community grant readers read and evaluate the

proposals based on their experience and perception of community needs. When the final dollar amount is posted by the Auditor's office the Board determines the allocation of the Community Drug Free Funds using all the data gathered such as performance on previous grant awards and including the requirements that 1/4th of the funds must be allocated to each of the three mandated areas. Finally, the allocations are presented and approved by the membership prior to appearing before the County Council to ask for the funds to be released. The General Fund was eliminated from our budget in 2007 based on Community Consultant's advice. It had been used to fund a supplemental grant request to Operation Fellowship, and those funds were transferred to Red Ribbon, Marketing, and the Drug/Alcohol Test Funds.

(5) Provide administrative expenses:

EXPENSE	COST
Coordinator salary	\$21,120.00
Coordinator Mileage	\$800.00
Office	\$1,200.00
Conference	\$1,000.00
Marketing	\$1,000.00
Training/Workshop Scholarships	\$750.00
Drug/ Alcohol Tests	\$270.00
Grant Writers	\$2,500.00
TOTAL	\$28,140.00

(6) Provide amount of any unused dollars from previous years:

\$7897.09

(7) Additional Comments:

An audit is conducted of our financial accounts annually. Accounts are kept based on our fiscal year which is Oct. 1 -Sept. 30 and the Community Drug Free Funds allocations are calculated on the annual amount accumulated by September 1. The actual funds are drawn January 1st. The amounts carried over in the LCC Special Programs and Administrative accounts are added to the budgeted amount prior to making the request for those programs. These are included as part of the LCC expenses budgeted

for the coming year and are not calculated as a portion of the Drug Free Communities Funds for the coming year grants.